PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fce(s), to: Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885 NSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maint-nance fees will be mailed to the current correspondence address as a proposal to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for national transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maint-nance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for national transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maint-nance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for national transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. I ach additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first above, or being facsimile addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 08/09/2006 34845 McGUINNESS & MANARAS LLP 125 NAGOG PARK ACTON, MA 01720 (Depositor's name (Signature (Date **a**-OG CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO. 9405 14357ROUS02U Jing Wu 06/25/2001 09/891,011 TITLE OF INVENTION: CONTROL PLANE FAILURE RECOVERY IN A NETWORK DATE DUE TOTAL FEE(\$) DUE PREV. PAID ISSUE FEE PUBLICATION FEE DUE ISSUE FEE DUE SMALL ENTITY APPLN. TYPE 11/09/2006 \$1400 **S**0 \$0 \$1400 NO nonprovisional CLASS-SUBCLASS ART UNIT EXAMINER 709-250000 2181 PATEL, NIKETA I 2. For printing on the patent front page, list Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 10101055 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence (2) the name of a single firm (having as a member a Address form PTO/SB/122) attached. registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is To Proceed a Control of the Control listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE; (CITY and STATE OR COUNTRY (A) NAME OF ASSIGNEE Nortel Networks Corporation or other private group entity 🔲 Government Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🎉 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: A check is enclosed. Ssue Fee Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any everpayment, to Deposit Account Number 50.256.9 (enclose an extra copy of this form). Publication Fee (No small entity discount permitted) Advance Order - # of Copies _ Change in Entity Status (from status indicated above) b. Applicant is no longer claiming SMALL ENTITY status, See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered alterney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Registration No. nderson

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and an application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time venue require to complete submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time venue require to complete submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time venue require to complete submitting the complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time venue require to complete submitting the complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time venue require to complete submitted to take 12 minutes to complete submitted to ta

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.